

#300001457

ORIGINAL

U.S. DISTRICT COURT  
NORTHERN DIST. OF TX  
FILED

Name: Tracy Nixon Pro Se  
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2023 JUL 18 PM 4:15  
DEPUTY CLERK MS

UNITED STATES DISTRICT COURT FOR THE  
of Texas Dallas DIVISION

Northern District

Tracy Nixon

(Full Name)

PLAINTIFF

vs.

Dallas County Texas

DEFENDANTS

CIVIL RIGHTS COMPLAINT

(42 U.S.C §1983, §1985)

3-23CV1600-E

CIVIL NO. \_\_\_\_\_  
(Supplied by Clerk)

A. JURISDICTION

1. Jurisdiction is proper in this court according to:

- a. ☒ 42 U.S.C. §1983  
b. ☐ 42 U.S.C. §1985  
c. ☐ Other (Please Specify) \_\_\_\_\_

2. NAME OF PLAINTIFF Tracy Nixon  
IS A CITIZEN OF THE STATE OF \_\_\_\_\_

PRESENT MAILING ADDRESS:

4939 ASHBROOK Road  
Dallas Texas 75215

3. NAME OF FIRST DEFENDANT Dallas County Texas  
IS A CITIZEN OF Dallas Texas  
(City and State)

IS EMPLOYED AS \_\_\_\_\_ at \_\_\_\_\_.

(Position and Title if Any) (Organization)

Was the defendant acting under the authority or color of state law at the time these claims occurred?

YES ☒ NO ☐ If your answer is "YES" briefly explain.

Defendant was at all times and in all  
Matters acting under color of state law when  
subjected Tracy Nixon to the wrongs and injuries

4. NAME OF SECOND DEFENDANT \_\_\_\_\_  
(If applicable)

IS A CITIZEN OF \_\_\_\_\_  
(City and State)

IS EMPLOYED AS \_\_\_\_\_ at \_\_\_\_\_.

(Position and Title if Any) (Organization)

Was the defendant acting under the authority or color of state law at the time these claims occurred?

YES ☐ NO ☐ If your answer is "YES" briefly explain.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

5. NAME OF THIRD DEFENDANT \_\_\_\_\_  
(If applicable)

IS A CITIZEN OF \_\_\_\_\_  
(City and State)

IS EMPLOYED AS \_\_\_\_\_ at \_\_\_\_\_.  
(Position and Title if Any) (Organization)

Was the defendant acting under the authority or color of state law at the time these claims occurred?

YES ☐ NO ☐ If your answer is "YES" briefly explain.

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6. NAME OF FOURTH DEFENDANT \_\_\_\_\_  
(If applicable)

IS A CITIZEN OF \_\_\_\_\_  
(city and State)

IS EMPLOYED AS \_\_\_\_\_ at \_\_\_\_\_.  
(Position and Title if Any) (Organization)

Was the defendant acting under the authority or color of state law at the time these claims occurred?

YES ☐ NO ☐ If your answer is "YES" briefly explain.

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(Use additional sheets of paper if necessary.)

**B. NATURE OF CASE**

1. Why are you bringing this case to court? Please explain the circumstances that led to the problem.

Tracy Nixon was incarcerated in the  
Dallas County Jail on June 1, 2023. Shortly  
thereafter, Tracy Nixon began experiencing  
cold sweats, fever, and back pain and  
vomiting uncontrollably.



C. CAUSE OF ACTION

1. I allege that my constitutional rights, privileges or immunities have been violated and that the following facts form the basis for my allegations: (If necessary you may attach additional pages)

- a. (1) Count I: Defendant caused Deprivation of Tracy Nixon rights to Due Process of Law and Rights to be Free from Cruel or Unusual Punishment.
- (2) Supporting Facts: (Describe exactly what each defendant did or did not do. State the facts clearly in your own words without citing legal authority or arguments.) Defendant abridged Tracy Nixon Rights and Privileges Secured to him by the Fourth, Eighth, and Fourteenth amendments to the United States Constitution and by other laws of the United States, by failing to provide Proper medical treatment, by failing to protect him and through Indifference to his medical Needs, In Violation of 42 U.S.C. § 1983.
- b. (1) Count II: Defendant acted deliberate and failed to provide Emergency medical care with reckless callous Indifference to the federal Protected Right.
- (2) Supporting Facts: On June 2, 2023 or About June 3, 2023 Tracy Nixon Slipped In the Shower and Requested Medical Attention Tracy Nixon did Not Get Medical treatment Defendant failed to Implement Policies, procedures, and Practices or Customs.
- c. (1) Count III: Defendant Prevented Tracy Nixon From receiving medical services and medication

(2) Supporting Facts: Tracy Nixon requested through Inmate Services to see, A Doctor, Because of vomiting Blood and asked Sheriff Detention officer to see, Nurse or Doctor June 2, 2023. The Sheriff later transferred to Dallas County Jail Infirmary the Plaintiff, medical staff refused medication to Tracy Nixon And sent Plaintiff back to Jail Cell on or about June 5, 2023 The Inmates Demanded Medical Care for Me.

D. INJURY

1. How have you been injured by the actions of the defendant(s)?

Defendant Immediate refusal to treat symptoms of appendicitis resulted in An appendectomy Emergency operation On June 5, 2023 for gangrenous appendicitis Tracy Nixon remained in Parkland Memorial Hospital Intensive Care until June 12, 2023

E. PREVIOUS LAWSUITS AND ADMINISTRATIVE RELIEF

1. Have you filed other lawsuits in state or federal court that deal with the same facts that are involved in this action or otherwise relate to the conditions of your imprisonment? YES ☐ / NO ☒. If your answer is "YES," describe each lawsuit. (If there is more than one lawsuit, describe additional lawsuits on additional separate pages, using the same outline.)

a. Parties to previous lawsuit:

Plaintiff(s): \_\_\_\_\_

Defendant(s): \_\_\_\_\_

b. Name of court and case or docket number: \_\_\_\_\_



- c. Disposition (for example: Was the case dismissed? Was it appealed? Is it still pending?) \_\_\_\_\_
- d. Issues raised: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_
- e. When did you file the lawsuit? \_\_\_\_\_  
Date Month Year
- f. When was it (will it be) decided? \_\_\_\_\_
2. Have you previously sought informal or formal relief from the appropriate administrative officials regarding the acts complained of in Part C? YES ☐ / NO ☐. If your answer is "YES" briefly describe how relief was sought and the results. If your answer is "NO" explain why administrative relief was not sought.  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**F. REQUEST FOR RELIEF**

1. I believe that I am entitled to the following relief: Two Hundred Million Dollars  
Damages within the Jurisdictional  
limits of this Court for the Plaintiff Injuries  
Physical and Mental Pain and Suffering in the Past  
and Future; reasonable Past and Future Medical expenses  
Past and Future wage loss and Loss of Earning Capacity  
Past and future mental anguish  
Past and Future Physical disability  
Past and Future Physical disfigurement and  
loss of Appendix

**DECLARATION UNDER PENALTY OF PERJURY**

The undersigned declares under penalty of perjury that he/she is the plaintiff in the above action, that he/she has read the above complaint, and that the information contained therein is true and correct. 28 U.S.C. §1746; 18 U.S.C. §1621.

Executed at 4415 S. Malcolm Ave Dallas TX 75215 on July 18, 2023  
(Location) (Date)

Tracy Nixon  
Signature

Tracy Nixon

United States District Court  
For the Northern District  
of Texas

Dallas Division

Tracy Nixon  
Plaintiff

vs.

Dallas County Texas  
Defendant

Demand for Jury Trial

Plaintiff Tracy Nixon Make demand  
for A Jury Trial

Respectfully Submitted

Tracy Nixon Pro Se  
4939 Ash Brook Road  
Dallas Texas 75227  
214-286-1739  
rofealme@aol.com



## CIVIL COVER SHEET

The JS 44 civil cover sheet and the information contained herein neither replace nor supplement the filing and service of pleadings or other papers as required by law, except as provided by local rules of court. This form, approved by the Judicial Conference of the United States in September 1974, is required for the use of the Clerk of Court for the purpose of initiating the civil docket sheet. (SEE INSTRUCTIONS ON NEXT PAGE OF THIS FORM.)

## I. (a) PLAINTIFFS

Tracy Nixon

(b) County of Residence of First Listed Plaintiff

Dallas

(EXCEPT IN U.S. PLAINTIFF CASES)

4939 Ashbrook Rd

Dallas Texas 75227

(c) Attorneys (Firm Name, Address, and Telephone Number)

Pro Se

## DEFENDANTS

Dallas County, Texas

County of Residence of First Listed Defendant

(IN U.S. PLAINTIFF CASES ONLY)

NOTE: IN LAND CONDEMNATION CASES, USE THE LOCATION OF THE TRACT OF LAND INVOLVED.

Attorneys (If Known)

unknown

JUL 18 2023  
MS

CLERK U.S. DISTRICT COURT

## II. BASIS OF JURISDICTION (Place an "X" in One Box Only)

- ☐ 1 U.S. Government Plaintiff
- ☒ 3 Federal Question (U.S. Government Not a Party)
- ☐ 2 U.S. Government Defendant
- ☐ 4 Diversity (Indicate Citizenship of Parties in Item III)

## III. CITIZENSHIP OF PRINCIPAL PARTIES (Place an "X" in One Box for Plaintiff and One Box for Defendant)

- |   | PTF                        | DEF                        |   | PTF                        | DEF                        |
|---|----------------------------|----------------------------|---|----------------------------|----------------------------|
| Citizen of This State                   | <input type="checkbox"/> 1 | <input type="checkbox"/> 1 | Incorporated or Principal Place of Business In This State     | <input type="checkbox"/> 4 | <input type="checkbox"/> 4 |
| Citizen of Another State                | <input type="checkbox"/> 2 | <input type="checkbox"/> 2 | Incorporated and Principal Place of Business In Another State | <input type="checkbox"/> 5 | <input type="checkbox"/> 5 |
| Citizen or Subject of a Foreign Country | <input type="checkbox"/> 3 | <input type="checkbox"/> 3 | Foreign Nation  | <input type="checkbox"/> 6 | <input type="checkbox"/> 6 |

## IV. NATURE OF SUIT (Place an "X" in One Box Only)

Click here for: [Nature of Suit Code Descriptions.](#)

CONTRACT	TORTS	FORFEITURE/PENALTY	BANKRUPTCY	OTHER STATUTES	
<input type="checkbox"/> 110 Insurance <input type="checkbox"/> 120 Marine <input type="checkbox"/> 130 Miller Act <input type="checkbox"/> 140 Negotiable Instrument <input type="checkbox"/> 150 Recovery of Overpayment & Enforcement of Judgment <input type="checkbox"/> 151 Medicare Act <input type="checkbox"/> 152 Recovery of Defaulted Student Loans (Excludes Veterans) <input type="checkbox"/> 153 Recovery of Overpayment of Veteran's Benefits <input type="checkbox"/> 160 Stockholders' Suits <input type="checkbox"/> 190 Other Contract <input type="checkbox"/> 195 Contract Product Liability <input type="checkbox"/> 196 Franchise	<b>PERSONAL INJURY</b> <input type="checkbox"/> 310 Airplane <input type="checkbox"/> 315 Airplane Product Liability <input type="checkbox"/> 320 Assault, Libel & Slander <input type="checkbox"/> 330 Federal Employers' Liability <input type="checkbox"/> 340 Marine <input type="checkbox"/> 345 Marine Product Liability <input type="checkbox"/> 350 Motor Vehicle <input type="checkbox"/> 355 Motor Vehicle Product Liability <input type="checkbox"/> 360 Other Personal Injury <input type="checkbox"/> 362 Personal Injury - Medical Malpractice	<b>PERSONAL INJURY</b> <input type="checkbox"/> 365 Personal Injury - Product Liability <input type="checkbox"/> 367 Health Care/Pharmaceutical Personal Injury Product Liability <input type="checkbox"/> 368 Asbestos Personal Injury Product Liability <b>PERSONAL PROPERTY</b> <input type="checkbox"/> 370 Other Fraud <input type="checkbox"/> 371 Truth in Lending <input type="checkbox"/> 380 Other Personal Property Damage <input type="checkbox"/> 385 Property Damage Product Liability	<input type="checkbox"/> 625 Drug Related Seizure of Property 21 USC 881 <input type="checkbox"/> 690 Other <b>LABOR</b> <input type="checkbox"/> 710 Fair Labor Standards Act <input type="checkbox"/> 720 Labor/Management Relations <input type="checkbox"/> 740 Railway Labor Act <input type="checkbox"/> 751 Family and Medical Leave Act <input type="checkbox"/> 790 Other Labor Litigation <input type="checkbox"/> 791 Employee Retirement Income Security Act <b>IMMIGRATION</b> <input type="checkbox"/> 462 Naturalization Application <input type="checkbox"/> 465 Other Immigration Actions	<input type="checkbox"/> 422 Appeal 28 USC 158 <input type="checkbox"/> 423 Withdrawal 28 USC 157 <b>PROPERTY RIGHTS</b> <input type="checkbox"/> 820 Copyrights <input type="checkbox"/> 830 Patent <input type="checkbox"/> 835 Patent - Abbreviated New Drug Application <input type="checkbox"/> 840 Trademark <input type="checkbox"/> 880 Defend Trade Secrets Act of 2016 <b>SOCIAL SECURITY</b> <input type="checkbox"/> 861 HIA (1395ff) <input type="checkbox"/> 862 Black Lung (923) <input type="checkbox"/> 863 DIWC/DIWW (405(g)) <input type="checkbox"/> 864 SSID Title XVI <input type="checkbox"/> 865 RSI (405(g)) <b>FEDERAL TAX SUITS</b> <input type="checkbox"/> 870 Taxes (U.S. Plaintiff or Defendant) <input type="checkbox"/> 871 IRS—Third Party 26 USC 7609	<input type="checkbox"/> 375 False Claims Act <input type="checkbox"/> 376 Qui Tam (31 USC 3729(a)) <input type="checkbox"/> 400 State Reapportionment <input type="checkbox"/> 410 Antitrust <input type="checkbox"/> 430 Banks and Banking <input type="checkbox"/> 450 Commerce <input type="checkbox"/> 460 Deportation <input type="checkbox"/> 470 Racketeer Influenced and Corrupt Organizations <input type="checkbox"/> 480 Consumer Credit (15 USC 1681 or 1692) <input type="checkbox"/> 485 Telephone Consumer Protection Act <input type="checkbox"/> 490 Cable/Sat TV <input type="checkbox"/> 850 Securities/Commodities/Exchange <input type="checkbox"/> 890 Other Statutory Actions <input type="checkbox"/> 891 Agricultural Acts <input type="checkbox"/> 893 Environmental Matters <input type="checkbox"/> 895 Freedom of Information Act <input type="checkbox"/> 896 Arbitration <input type="checkbox"/> 899 Administrative Procedure Act/Review or Appeal of Agency Decision <input type="checkbox"/> 950 Constitutionality of State Statutes
<b>REAL PROPERTY</b> <input type="checkbox"/> 210 Land Condemnation <input type="checkbox"/> 220 Foreclosure <input type="checkbox"/> 230 Rent Lease & Ejectment <input type="checkbox"/> 240 Torts to Land <input type="checkbox"/> 245 Tort Product Liability <input type="checkbox"/> 290 All Other Real Property	<b>CIVIL RIGHTS</b> <input checked="" type="checkbox"/> 440 Other Civil Rights <input type="checkbox"/> 441 Voting <input type="checkbox"/> 442 Employment <input type="checkbox"/> 443 Housing/Accommodations <input type="checkbox"/> 445 Amer. w/Disabilities - Employment <input type="checkbox"/> 446 Amer. w/Disabilities - Other <input type="checkbox"/> 448 Education	<b>PRISONER PETITIONS</b> <b>Habeas Corpus:</b> <input type="checkbox"/> 463 Alien Detainee <input type="checkbox"/> 510 Motions to Vacate Sentence <input type="checkbox"/> 530 General <input type="checkbox"/> 535 Death Penalty <b>Other:</b> <input type="checkbox"/> 540 Mandamus & Other <input type="checkbox"/> 550 Civil Rights <input type="checkbox"/> 555 Prison Condition <input type="checkbox"/> 560 Civil Detainee - Conditions of Confinement			

## V. ORIGIN (Place an "X" in One Box Only)

- ☒ 1 Original Proceeding
- ☐ 2 Removed from State Court
- ☐ 3 Remanded from Appellate Court
- ☐ 4 Reinstated or Reopened
- ☐ 5 Transferred from Another District (specify)
- ☐ 6 Multidistrict Litigation - Transfer
- ☐ 8 Multidistrict Litigation - Direct File

## VI. CAUSE OF ACTION

Cite the U.S. Civil Statute under which you are filing (Do not cite jurisdictional statutes unless diversity): 42 U.S.C. 1983

Brief description of cause: This case arises from inmate failing to be provided medical care

## VII. REQUESTED IN COMPLAINT:

☐ CHECK IF THIS IS A CLASS ACTION UNDER RULE 23, F.R.Cv.P.

## DEMAND \$

Two Hundred million dollars

CHECK YES only if demanded in complaint:

JURY DEMAND: ☒ Yes ☐ No

## VIII. RELATED CASE(S) IF ANY

(See instructions):

JUDGE

DOCKET NUMBER

DATE

June 18, 2023

SIGNATURE OF ATTORNEY OF RECORD

Tracy Nixon Prose

FOR OFFICE USE ONLY

RECEIPT # \_\_\_\_\_ AMOUNT \_\_\_\_\_ APPLYING IFP \_\_\_\_\_ JUDGE \_\_\_\_\_ MAG. JUDGE \_\_\_\_\_